Item ID: D205-634-011   Accept   Setup **Start**

Revision ID:

Item Name: Skidtube   **Stop**

Start Date: 29/04/2010   **Start Qty:** 1.00   **Cust Item ID:**

Required Date: 13/05/2010   **Req'd Qty:** 1.00   **Customer:**

Reference:

Approvals: **Process Plan:** _____ **Date** *10-4-29*   **Tooling:** _____ **Date:** _____   Run **Start**

     QC: _____ **Date:** _____   **SPC (Y/N):** _____ **Date:** _____   **Stop**

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Draw Number	Draw Rev.	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	**Revision Nbr**								
IIN D205-634	Rev F								
100		0.00							
DC Document Control	Memo Photocopy bluefile &type labels per PPP CHG 007							BG 10/05/31	
110	Pick Kit	0.00							
Packaging Packaging	Memo	0.00							
120	QC4- 100% Inspect kits for completeness	0.00							
QC Quality Control	Memo	0.00							

58490

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WORK ORDER CHANGES

W/O:								
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

WORK ORDER NON-CONFORMANCE (NCR)

NCR:			Corrective Action	Section B				
DATE	STEP	Description of NC Section A	Initial Chief Eng	Action Description Chief Eng	Sign & Date	Verification Section C	Approval Chief Eng	Approval QC Inspector

NOTE: Date & initial all entries

H:\fFORMS\Quality Assurance\approved QA\NCRWO RevE

Item ID:	D205-634-011		Accept					Setup	Start	
Revision ID:										
Item Name:	Skidtube								Stop	
Start Date:	29/04/2010	**Start Qty:** 1.00				**Cust Item ID:**				
Required Date:	13/05/2010	**Req'd Qty:** 1.00				**Customer:**				
Reference:										

Approvals:	Process Plan: _____	Date: _____	Tooling: _____	Date: _____	Run	Start	
	QC: _____	Date: _____	SPC (Y/N): _____	Date: _____		Stop	

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Draw Number	Draw Rev.	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130		0.00							
Packaging	Memo	0.00				16-5-31 SP			
Packaging	Identify and pack for shipping as per PPP D205-634-011 Location: ___ PPP rev: ___								
140	QC21- Final Inspection - Work Order Release	0.00				10/06/02			
QC	Memo	0.00							
Quality Control									

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WORK ORDER CHANGES

W/O:							
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

WORK ORDER NON-CONFORMANCE (NCR)

NCR:			Corrective Action	Section B				
DATE	STEP	Description of NC Section A	Initial Chief Eng	Action Description Chief Eng	Sign & Date	Verification Section C	Approval Chief Eng	Approval QC Inspector

NOTE: Date & initial all entries

Picklist Print

April 29, 2010 11:39:19 AM

Work Order ID:	58223		
Parent Item:	D205-634-011		
Parent Item Name:	Skidtube	**Start Date:** 29/04/2010	**Required Date:** 13/05/2010
Comments:	IPP Rev:P□02.08.28□Removed QC5 from Step 5□KJ□	**Start Qty:** 1.00	**Required Qty:** 1.00
	IPP Rev:Q 08-08-12 now @ chg 006 (DSI 9417) DD verified by:		
	IPP Rev R 09.01.28 now chg 007 DSI9417 revB EC verified by:		

Component Item ID/	Replacement	Mfg/	Bin	Primary	Last	Route	Unit of	Qty on	Qty per Kit	Qty	Date	Status
D205-634-041		Manufactured	No			110	Each	0.0000	1		58450	
Replacement Skidtube												
K10003		Manufactured	No			110	Each	1.0000	1		5920	
Saddle, D205-634-011 CHG007												

	Location		Loc Qty		Loc Code
	FG		1		
	57371		1		

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W/O:		WORK ORDER CHANGES						
DATE	**STEP**	**PROCEDURE CHANGE**	**By**	**Date**	**Qty**	**Approval** Chief Eng / Prod Mgr	**Approval** QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	**STEP**	**Description of NC** Section A	**Corrective Action** Section B			**Verification** Section C	**Approval** Chief Eng	**Approval** QC Inspector
			Initial Chief Eng	**Action Description** Chief Eng	**Sign &** **Date**			

NOTE: Date & initial all entries